

Message Text

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LIMDIS

E.O. 11652: GDS

TAGS: PINT PINS PFOR ET (HAILE SELASSIE, EMPEROR)

SUBJECT: MORE INFORMATION ON THE EMPEROR'S CONDITION

REF: ADDIS 6409 AND PREVIOUS

1. THE FOLLOWING WAS OBTAINED FROM A RELIABLE EXPATRIATE MEDICAL SOURCE WITH DIRECT ACCESS. NATURE OF THE SOURCE SHOULD BE TREATED AS NOFORN.

2. SOURCE (A SURGEON) EXAMINED EX-EMPEROR FEW DAYS PRIOR LATTER'S PROSTATECTOMY AS MEMBER TEAM OF ETHIOPIAN AND FOREIGN PHYSICIANS. TEAM FOUND ENLARGED PROSTATE AND RECOMMENDED SURGERY, SPECIFICALLY TRANS-URETHRAL RESECTION (TUR). TEAM OF VIEW THAT PATIENT SHOULD EITHER BE OPERATED ABROAD OR THAT SUITABLE EXPERTISE AND EQUIPMENT SHOULD BE BROUGHT TO ADDIS FOR THIS PROCEDURE. TEAM INCLUDED EMPEROR'S LONG-TIME PHYSICIAN, DR. ASRAT WOLDEYES, A COMPETENT GENERAL SURGEON (BUT NOT UROLOGIST).

3. SOURCE SAID THAT EMPEROR "QUITE SCLEROTIC"; SHOWED EXPECTED SIGNS OF SENILITY BUT OTHERWISE IN GOOD CONDITION. INITIALLY, EMPEROR REACTED TO WORD THAT SURGERY MIGHT BE REQUIRED WITH ANGER "TEARING OUT CATHETER," ETC. IN SUBSEQUENT CONSULTATION, HOWEVER, HE SEEMED IN GOOD SPIRITS AND WAS PHILOSOPHICAL ABOUT NEED FOR INTERVENTION, COMMENTING THAT ACCORDING TO SCRIPTURE MAN'S SPAN WAS THREE SCORE AND TEN YEARS AND ANYTHING BEYOND THAT USUALLY

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MEANT SUFFERING. EMPEROR ASKED SOURCE IF OPERATION WOULD BE DONE

IN EUROPE (MENTIONING LONDON, PARIS, ROME) LEAVING IMPRESSION HE DID NOT FULLY GRASP HIS SITUATION. HE ALSO ASKED SOURCE WHETHER PEOPLE WONDERING ABOUT FACT HE (EMPEROR) REMAINING "HIDDEN UP HERE" SO MUCH OF THE TIME. SOURCE COMMENTED THAT IT SEEMED EMPEROR UNDER IMPRESSION HE IS IN "PROTECTIVE CUSTODY."

4. IN VIEW RECOMMENDATION FOR TUR (CF PARA 2 ABOVE) SOURCE SURPRISED TO BE TOLD MAY 30 THAT DR. ASRAT WOULD OPERATE ON EMPEROR NEXT DAY. ACCORDING SOURCE, ASRAT TOLD HIM THAT THIS WAS ORDER FROM PMAC BUT SOURCE IS CONVINCED THAT ASRAT WANTED TO PROCEED INTER ALIA TO ENHANCE OWN PRESTIGE. SOURCE IS EQUALLY SURE THAT ASRAT HAS NEITHER THE KNOWLEDGE NOR THE EQUIPMENT TO DO TUR AND CONCLUDES THAT EMPEROR SUBJECTED TO OLDER, HARSHER PROCEDURE, VIZ., SUPRA PUBIC PROSTATECTOMY.

5. SOURCE AND RMO AGREE THAT ANNOUNCED LENGTH OF PROCEDURE (REFTEL) LIES AT UPPER LIMITS OF NORMALCY. THEY ALSO AGREE THAT PROCEDURE IS TRICKY ENOUGH SO THAT REFERENCE IN OFFICIAL STATEMENT TO GOOD PROGNOSIS IS SOMEWHAT PREMATURE. SOURCE OF OPINION, HOWEVER, THAT EMPEROR'S GENERAL CONDITION SUCH HE SHOULD RECOVER NORMALLY IF COMPLICATIONS CAN BE AVOIDED.

6. SEPARATE MEDICAL SOURCE WITH DIRECT ACCESS, WHOSE INFORMATION EMBASSY CONSIDERS AUTHORITATIVE, HAS PROVIDED FOLLOWING JUNE 2: EMPEROR HAD INFECTION PRIOR TO OPERATION. HE WAS GIVEN 2 GRAMS AMPICILLINE/DAY FOR TEN DAYS, NONE FOR FIVE THEREAFTER AND THEN OPERATED. HIS VITAL SIGNS WERE CLOSELY MONITORED THROUGHOUT. PULSE AND BLOOD PRESSURE "DID NOT BUDGE, NOT EVEN ONE EXTRA SYSTOLE." NO UREMIA WAS FOUND. OPERATION WENT WELL. PROSTATE WAS BASEBALL SIZED AND SUPRAPUBIC PROSTATECTOMY THEREFORE MANDATORY. EMPEROR'S POST OPERATIVE STATE WAS GOOD. HOWEVER, AT 100 HRS. LOCAL JUNE 2 PATIENT HAD DEVELOPED TEMPERATURE OF 39 DEGREES CENTRIGRADE. ALTHOUGH CAUSE OF TEMPERATURE STILL BEING INVESTIGATED (BLOOD CULTURE) AND RESULTS NOT YET IN, IT IS CURRENTLY SURMISED THAT TEMPERATURE MAY HAVE BEEN CAUSED BY BLOOD TRANSFUSION ADMINISTERED DURING THE PROCEDURE. COMMENT: FEVER COULD, OF COURSE, PROVE INDICATIVE OF POST-OPERATIVE INFECTION.
HUMMEL

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